Dear Hal,

Forgive this long delay in answering-between the magazine & the hospital I have been unusually hard pressed for many weeks, with no end seemingly in sight.

Good to hear the tests show nothing grossly unusual. Would still suggest, though, as much care betting taken of yourself as you can manage.

Congratulations, too, an decision re: Freedom of Information Act. Climate of the Nation continues to shift, however, and I wonder if the times will allow you to continue unhindered. But we here continue to pull for you, of course.

The matter of the girl in New Orleans is a difficult one. I've been trying to come up with some advice to give you, with of course basic conflict between emotional & rational approachs doing its Who maniantk wouldn't want to help such best to cloud everything. a person as you describe? Obviously she has received little enough of it and need can hardly be questioned. O.K. -But the plain truth is that the she clearly needs, in my opinion, a staggering amount of professional help of a very specific type. You can to some extent advise her on how to get it, but you yourself cannot provide it. In addition, outcome of treatment (especially re: drug addiction) not at all predictable. Methadone seems to be working in some cases I've seen recently, but long-range results still unknown. If you decide to bring her to Maryland you would have to probably undertake having someone with her almost all of the time, and emergency treatment arrangements should be made in advance so that they would be at hand the instant you need them. Quite aside from the physical problems you describe, there is the matter & drug-induced psychosis -- which I can assure you is sometimes m most difficult to deal with, even in a psychiatric hospital. Violence, most often to one's self but not always, is ever a good possibility. At the present time about the only reasonably safe attitude to take is that very likely long-term hospitalization in necessary, followed by some sort of preparation for staying off drugs after release -- which means training for some sort of work that would make the patient at least nominally independent and self-sustaining. A tall order, inevitably. And as you quite rightly note, her drug pakiana problem & your own alcohol experience cannot really be equated. About all one can say is that yes, she does have a much better chance of kicking the habit if she truly wants to do so...but wanting to help yourself and being able to help yourself are not the same thing. Too, heroin is more than a bit different than sipping martinis.... For what it's worth, Hal, my advice would be to try & encourage her to voluntarily enter the hospital which seems to offer the best facilities -- with so much research now being done there may well be more than one hopsital that would be very happy to take her, gratis. I would think it probably unwise to consider taking her into your home until such a hosp. had given best clearance possible. -But about the writing, I see no reason not to strongly encourage her in this direction.

In haste, but with warmest regards,